U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

his report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

	For Official Use Only
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Ε	( AUG 1 5 2005 )
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READ THE INSTRUCTIONS CAREFUL	LY BEFORE PREPARING THIS REPORT.
E (AUG 152005)	
INS DRUIT	
1. File Number U - 6637	2. Fiscal Year Covered From:
	01 / 01 / 2004 Through: $12 / 31 / 2004$
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name JAMES I THAPP	Name IBEW Local Union 702
	Labor Organization File Number 022-643
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 1408CORd 325	Street 106 North Monroe Street
city Scott City	City West Frankfort
State M.O. ZIP Code + 4 63780	State Illinois ZIP Code + 4 62896
5. Position in labor organization. EXECUTIVE BOAV	d member
	sions set forth in the instructions):
A. Held an interest in, engaged in transactions (including loans) with, or omentary value from an employer whose employees your organization.	derived income or other economic benefit of on represents or is actively seeking to represent.
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	7.5.0
Street	7.b. Amount.
City	
State ZIP Code + 4	<u> </u>
Signa	iture
15. Signature and verification. The undersigned declares, under penalty of F submitted in this report (including the information contained in any accompanyi dersigned's knowledge and belief, true, correct, and complete. (See the second complete)	ng documents), has been examined by the signatory and is, to the best of the
Signed James I. Thank	On 7-25-05 573-545-3503  Date Telephone Number

Name of Person Filing James I. Tharp	File Number U-
B. Held an interest in or derived income or economic benefit with monetary valus substantial part of which consists of buying from, selling or leasing to, or otherw of an employer whose employees your labor organization represents or is active any part of which consists of buying from or selling or leasing directly or indiming with your labor organization or with a trust in which your labor organization.	ise dealing with the business by seeking to represent, or rectiv to, or otherwise
8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name	a. Labor Organization
Trade Name, if any:	b. Trust
P.O. Box, Bldg., Room No., if any	c. Employer
Street	
State ZIP Code + 4	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	11.b. Approximate dollar value of such dealing.
	12.a. Nature of interest held or income received.
State ZIP Code + 4	
	12.b. Amount.
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value.
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name Muelhausen and Stefani	Received I meal at IBEZO Christmas luncheon,
Trade Name, if any:	1 13520 61111011 -0
P.O. Box, Bldg., Room No., if any	
Street 55 W. Wacker Drive, Suite 1200	
city Chicago	
te ZIP Code + 4 6060 /	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment. \$29.25

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selfing or leasing to, or otherwise dealing with the business of an emptyery shorts every size from grantization represents an a activety selecting for income the consists of tuying from or selfing or leasing dicelly or indirectly to, or otherwise angle with the obstances and society short part abor organizations in enterested.  8. Name and societies of Business (including trade name, if any).  9. Business deals with  10. Business deals with  11. Business deals with  12. Employer  11. Business deals with  12. Business deals with  13. Nature of such dealing.  14. Nature of interest held or income received.  15. Amount  16. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.  14. Nature of payment.  14. Nature of payment.  14. Nature of payment.  14. Nature of payment.  14. Nature of payment.	
Trade Name, if any	
Trade Name, if any:  P O Box, Bldg, Room No., if any  Street  City  State  ZIP Code + 4  10. If 9 b. or 9 c. is checked give trust or employer's name.  Name  Trade Name, if any:  P O Box, Bldg, Room No., if any  Street  11. b. Approximate dollar value of such dealing  12 a. Nature of interest held or income received.  C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.  13.a. Name and address of Employer or Labor Relations Consultant  14.a. Nature of payment.	
Trade Name, if any:  P C Box, Bidg, Room No., if any  Street  Chy  State  ZiP Code + 4  10. If 9 b. or 9 c. is checked give trust or employer's name.  Name  Trade Name, if any:  P O Box, Bidg, Room No., if any  Street  ZiP Code + 4  11. a. Nature of such dealing.  11. b. Approximate dollar value of such dealing  12. a. Nature of interest held or income received.  C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.  13. a. Nature of payment.	
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15.a. Name and address of Employer of Labor Netations Consultant	
Name Muel housen and (Refani)   Received & Daseball	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street 55 W. Wacker Drive, Suite 1200	
City Chicago	
.1e IL ZIP Code + 4 60601	
13.b. Is the Business an Employer or Consultant 2 ?	